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Moral Aspects of “Moral Injury”: Analyzing Conceptualizations on the Role of Morality in Military Trauma

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ABSTRACT

In clinical circles, the concept of “moral injury” has rapidly gained traction. Yet, from a moral philosophical point of view the concept is less clear than is suggested. That is, in current conceptualizations of moral injury, trauma’s moral dimension seems to be understood in a rather mechanistic and individualized manner. This article makes a start in developing an adequately founded conceptualization of the role of morality in deployment-related distress. It does so by reviewing and synthesizing insights from different disciplines into morality and trauma. This discussion will lead to three positions: (1) values and norms are by definition characterized by conflict, (2) moral conflict may entail important social dimensions, and (3) moral conflict may lead to altered beliefs about previously held values. These insights provide important steps in further developing conceptions of the role of morality in deployment-related suffering.

KEYWORDS

PTSD; trauma; moral injury; military ethics; morality; shame and guilt

Introduction

Veteran Scott Ostrom, whose story is featured in a lauded photo series of photographer Craig Walker, is proud to be a marine. On Veterans Day and Memorial Day, he decorates his car with a marine battalion flag. Yet, he also feels severely guilty about what he had to do as a marine. The Denver Post (2012) quotes him saying:

I was a brutal killer, and I rejoiced in it. I was bred to be a killer, and I did it. Now I’m trying to adapt and feel human again. But to feel human, I feel guilty ... That’s why I can’t eat: I feel guilty, I feel sick.

Ostrom is one of the many veterans who speak of experiencing severe feelings of guilt. Ostrom is also one of the many veterans who are diagnosed with posttraumatic stress disorder (PTSD). PTSD is currently the dominant (if not the only) explanatory concept of deployment-related suffering. Yet, the PTSD concept is also increasingly criticized for paying too little attention to the kind of suffering Ostrom’s account speaks of, namely, (potential) moral aspects of military trauma (see Shay 1994; Litz et al. 2009). Psychologists Litz et al. (2009) argue that, in the last decades, “there has been very little attention paid to

the lasting impact of moral conflict-colored psychological trauma among war veterans in the clinical science community” (Litz et al. 2009, 696). At the same time, however, mental health practitioners do report that moral conflict is a significant element of the suffering of many soldiers (Drescher et al. 2011).

Recently, the concept of “moral injury” has gained traction. The general idea is that moral injury is the result of combat experiences that affect soldiers’ moral fundamentals and, as such, cause suffering. Psychologists Litz et al. (2009) have developed a preliminary conceptual model of moral injury, which is considered to be a stepping stone towards a clinical care model. The model provides initial ideas about what moral injury entails, how it is caused, and how it can be treated.

Yet, the development of conceptualizations about moral conflict-colored distress appears to be not only an important development, but also a complex one. Questions about the nature of morality, how morality can be injured, and the consequences of such injury are complicated and should be taken into account when working out conceptual models with regard to moral injury. When this complexity is not addressed, implicit and unsubstantiated assumptions about the nature and role of morality are easily incorporated, leading to a rather insubstantial basis for the development of both the concept of moral injury as such and clinical practices based thereupon.

This article analyzes different approaches to moral dimensions of deployment-related distress. The ultimate aim of this undertaking is to contribute to an adequately-founded conceptualization of the role of morality in deployment-related distress. The first part of this article provides an overview of whether and how morality is accounted for in prevalent conceptualizations of deployment-related distress, namely, PTSD and moral injury. This overview shows that both PTSD models and the moral injury-model address moral emotions like shame and guilt, yet in different ways. The overview also reveals that both psychological models employ one-dimensional conceptualizations of morality; implicitly, both approach morality in a rather mechanistic and individualistic fashion. The second part of this article aims to formulate a more developed approach to morality’s role in suffering. Therefore, it reviews a number of “alternative” approaches to morality in the context of deployment-related distress. This review will show that values and norms are, by definition, characterized by conflict; that moral conflict may entail important social dimensions; and that, therefore, moral conflict may lead to altered beliefs about previously-held values and norms. These insights, we believe, provide important steps in further developing conceptions of (deployment-related) moral conflict.

Shame and guilt in models of PTSD and moral injury

Moral emotions in prevalent PTSD understandings

In the most recent version of the official classification and diagnostic guide of mental disorders, the DSM-5, PTSD is formulated as “the development of characteristic symptoms following exposure to one or more traumatic events” (DSM-5 2013, 274). The event is defined as “[e]xposure to actual or threatened death, serious injury, or sexual violence”. The symptoms include re-experiencing of the event(s), negative mood, outbursts of panic or anger, and avoidance of confrontation with the event(s) or situations that are reminders of it (DSM-5 2013, 271–272).

The central emotion in PTSD models appears to be fear. Earlier versions of the DSM classified PTSD as an anxiety disorder, and while it is no more classified as such, the most commonly used treatments for PTSD are still generally fear-based (Drescher et al. 2011). It is this focus on fear and anxiety which has been explained as an important reason why moral emotions (for instance shame and guilt) currently receive “very little attention ... in the clinical science community” (Litz et al. 2009, 696; see also Lee, Scragg, and Turner 2001).

This does not mean, however, that moral struggles related to traumatic experiences have gone completely unnoticed. It has long been acknowledged that moral emotions like shame and guilt can be related to trauma. For instance, “survivor guilt”, which refers to guilt felt when surviving combat while others have not, is a well-known concept. Although after the first DSM survivor guilt was removed from the criteria of PTSD, it did appear as an associated feature. Also, the latest DSM had included the symptom: “Persistent, distorted cognitions about the cause or consequences of the traumatic event(s) that lead the individual to blame himself/herself or others” (DSM-5 2013, 272). Prevalent understandings of PTSD thus do acknowledge guilt and shame.

That being said, guilt and shame are approached in a particular way in PTSD models. First, moral struggles seem to be predominantly treated as symptoms – as consequences – of posttraumatic stress, not as potential *sources* of stress. Indeed, potentially traumatic events as captured by PTSD are those that are characterized by life-threat and fear, and not necessarily by moral conflict.

Secondly, and assumedly related to this particular focus on moral struggles as symptoms, PTSD models also appear to employ a particular approach to guilt: namely, one that understands guilt as a result of so-called cognitive *distortions*. Such an approach is not only indicated in the DSM classification of PTSD, but also central in the works of influential psychologists on the topic of trauma-related guilt. Take, for instance, Edward Kubany’s conceptualization of guilt. In an article on combat-related guilt, Kubany speaks of guilt as based on “false assumptions and faulty logic” (1994, 5). He not only explains guilt felt by survivors in this way, but also guilt felt by soldiers who have killed in war. According to Kubany, combat-related guilt is based on the false premise of “I should have known better” (6) or as the failure “to realize that the actions not chosen would have probably had worse consequences than actions taken” (9). In his latest elaboration of a “multidimensional model” of guilt (Kubany and Watson 2012), Kubany continues to conceptualize guilt as “irrational guilt”. Further, in a short closing paragraph, Kubany explicitly opposes victims of such guilt to “perpetrators”, whom he defines as “socially deviant individuals” who do not experience remorse. In doing so, he approaches guilt as either present but irrational or not present in a severely pathological way.

In some cases, guilt may certainly be understood as unfounded and irrational. Yet, a sole focus on guilt as the result of erroneous thinking fails to reflect on how “germane” guilt is, and thus how it should be understood and dealt with. Undeniably, guilt can also be appropriate.

Some might be inclined to say that moral judgments regarding the correctness of guilt are irrelevant in clinical practice, and perhaps even harmful. However, a focus on alleviating guilt through efforts to make veterans feel less responsible for their actions is a moral judgment as well. Furthermore, some veterans have reported feelings of serious alienation when their expressions of guilt were met with either implicit justification or suppression of

subjectivity from the side of the practitioner. These veterans perceived the negative judgment of their own actions as an important way to make sense of those actions (Lifton 2005; Boudreau 2011; see also Bica 1999). Thus, being recognized in one's own moral judgments can be crucial to those veterans that grapple with the belief that they have committed immoral acts.

This brings us to the concept of moral injury, which proposes that moral conflict may lie at the heart of deployment-related suffering, and which complicates an approach to self-blame as the result of distorted cognitions.

Moral emotions in moral injury

In an essay that argues for the nascent concept of moral injury, Iraq veteran Boudreau (2011) describes why he feels that PTSD cannot capture the key elements of his distress:

I accepted the diagnosis from the VA [Veteran Affairs] and from everyone else, and I'm sure that my condition was in part that, but inwardly I knew that the greatest pain I felt was not linked to those moments when violence was being directed at me but when I was involved in inflicting it on others. Post-traumatic stress just didn't seem to fit. So what could I call this pain? It felt a lot like guilt, so that's what I started calling it, but in the Diagnostic and Statistical Manual of Mental Disorders (DSM) under PTSD there is no mention of guilt, except for "survivor's guilt" ... The term "moral injury" has recently come afloat, and it applies to exactly the kind of guilt I'm talking about. (Boudreau 2011, 748)

Upon returning from Iraq, Boudreau started to struggle with a number of actions he had performed, such as ordering to use "a heavy hand" in house searches and issuing approval to shoot an unarmed man who appeared to be digging a hole for a roadside bomb. While at the time he took pleasure in some of these acts, he now feels remorse for them. In his autobiography, Boudreau states that "I chose to ignore the facts and to ride blithely through the fantasy without critique" (Boudreau 2008, 207). He says, "I should have known better", and he goes on to explain this idea as a revelation. This is a wholly different view on guilt than Kubany's notion of faulty logic.

As mentioned, the concept of moral injury is a relatively young concept. Currently, the most influential conceptualization of moral injury has been developed collaboratively by Litz et al. (2009; see also Maguen and Litz 2012). It seems that their conceptualization is also the only systematic model of moral injury. The authors, all clinical or theoretical psychologists, provide in their much-cited article titled "Moral Injury and Moral Repair in War Veterans" a preliminary model and intervention strategy. In the relatively scarce literature and media accounts that discuss moral injury, one will virtually always encounter reference to these authors, sometimes as the only source.

Litz et al. (2009) do not aim to replace the concept of PTSD, and neither do they suggest that "moral injury" should be a DSM classification. Rather, they aim to bring forward a concept that captures particular "kinds" of suffering in ways that deviate from dominant clinical PTSD understandings. The authors argue that while some characteristics of PTSD may overlap with what they call moral injury, in other ways the latter is unique. They state that while "morally injured" soldiers may display symptoms that are similar to those described by PTSD, central in moral injury are feelings of shame and guilt. Their definition of "potentially morally injurious experiences" also deviates from the ways in which PTSD defines potentially traumatic experiences. As a working definition of such experiences the

authors propose: “Perpetrating, failing to prevent, bearing witness to, or learning about acts that transgress deeply held moral beliefs and expectations” (Litz et al. 2009, 700). Whereas PTSD models focus on exposure to (threatened) violence, moral injury captures those events that invoke moral conflict, which may or may not involve threat.

In a short paragraph titled “What are morals?”, Litz et al. explain morality as a “code” that individuals use to “navigate through life”. They further define morality “as the personal and shared familial, cultural, societal, and legal rules for social behavior, either tacit or explicit” and as “fundamental assumptions about how things should work and how one should behave in the world” (2009, 699). Litz et al. explain that an experienced violation of the “moral code” can result in profound feelings of shame and guilt.

In line with their specific focus on certain “kinds” of deployment-related suffering, but not inevitably following from them, Litz et al. also employ a specific understanding of shame and guilt. Throughout their article they stress that while commonly used therapies address judgments and beliefs about moral violations as distorted ones, such judgments and beliefs may also be “quite appropriate and accurate” (2009, 702). Therefore, they argue that it is:

important to appreciate that holding onto the idea of a moral self or a moral code may require that a bad act be judged as such ... Rather, the goal is to help the service member or veteran to move toward an appreciation of context and the acceptance of an imperfect self. (2009, 703)

As such, Litz et al. differ from Kubany’s theoretical model, which tends to frame beliefs such as “I should have known better” as a distorted thought that needs to be corrected.

In their own model, Litz et al. (2009) use and adapt existing cognitive models and cognitive behavioral therapies for PTSD. “Similar to social-cognitive theories of PTSD”, they argue “that moral injury involves an act of transgression that creates dissonance and conflict because it violates assumptions and beliefs about right and wrong and personal goodness” (Litz et al. 2009, 689). The key adjustment the authors make to existing treatment models is that they place moral conflict at the center, which they approach as germane rather than pathological. The ultimate goal of the treatment they propose is “to get service members and veterans to articulate ideas about the capacity to do good and to talk about being forgiven and the need for self-forgiveness, even if they don’t initially accept these ideas” (2009, 702).

Implicit assumptions about morality

The preliminary model of Litz et al. pays substantially more attention to moral dimensions of deployment-related suffering than currently prevalent PTSD models appear to do. Litz et al.’s model of moral injury takes into account that feelings of guilt may in some cases and aspects be understood as the result of distorted cognitions, and in some cases and aspects as the result of reasonable judgments. However, their model seems to implicitly employ a rather one-dimensional approach to morality, and also to the experiences that may be involved in moral injury. Before elaborating on this statement, it is important to take a closer look at what morality entails.

A well-accepted definition within the disciplines of philosophy, ethics, and anthropology describes morality as a total of values and norms in a specific socio-historical context. This minimal definition already indicates the complexity of morality. It shows that

morality is not only an intra-individual matter, it is also present on different social levels (group, organization, nation) and in different social contexts (ethnic cultures, social and professional subcultures) (see also Baarda and Verweij 2006, 2). An individual lives and acts on a daily basis within a range of these – often overlapping and sometimes opposing – social levels and contexts. As a result, an individual incorporates multiple sets of values and norms, which may correspond but also contradict one another (see Hitlin and Vaisey 2013).

Furthermore, even a specific set of values or a specific value system cannot be understood as an orderly and congruent entity. Values do not always join each other in perfect harmony, they often co-exist in tension and sometimes even in conflict. This becomes most clear in confrontations with moral dilemmas. A moral dilemma entails a situation in which one is confronted with competing moral principles that one considers important, but which cannot simultaneously be honored; one principle has to be violated in order to respect the other. In a moral dilemma, there is thus no unequivocal “right” or “wrong” decision (see also Baarda and Verweij 2009, 111).

This rudimentary description of morality can be used to evaluate how morality is approached in different conceptualizations of deployment-related distress. This section will analyze Litz et al.’s approach to morality on the basis of this description. Despite Litz et al.’s nuanced explicit definition of morality (“the personal and shared familial, cultural, societal, and legal rules for social behavior, either tacit or explicit” [2009, 699]), their model nevertheless seems to fail to take morality’s complexity into account, in several ways.

Morality as a consistent belief system

Throughout their article, Litz et al. speak of morality as a firm “code” or “belief system”, and of morally tragic experiences as “transgressions” of this code or system. As cited before, they describe a morally injurious experience as an event that “violates assumptions and beliefs about right and wrong and personal goodness” (698). That is, “acts of transgression produce dissonance (conflict), and dissonance is only possible if the service member has an intact moral belief system” (701).

The conflicts that Litz et al. describe are conflicts between, on the one hand, one’s “moral code” or “moral belief system” and, on the other, a transgression from the outside that violates this inner moral code. As a result, they speak of conflicts between beliefs about how one relates to this code. To use the terminology of the cognitive models on which they draw, we could say that they refer to, for instance, a conflict between the cognition “I do/am good” and the cognition “I do/am evil”. Yet, the authors do not speak of conflicts *within* the so-called moral code or moral belief system. They speak of “transgression” of the code or system by an act and, in doing so, they approach morality as a system of values which may be violated by intruding acts, but not by one another. Their model thus approaches morality as a coherent and harmonious system rather than as a constellation of possibly conflicting values.

Morality as an individual belief system

Next to an implicit notion on the nature of morality (as a coherent belief system), Litz et al.’s model also reveals implicit assumptions on where morality is “located”. In their

model, the soldier experiences the self-directed emotions of shame and guilt and, consequently, the goal of treatment is “holding onto the idea of a moral self or a moral code” through “the acceptance of an imperfect self” (703). So, although the model’s definition of morality explains that “a moral code” develops in social contexts, it eventually approaches moral injury as an inwardly directed experience that does not “speak back” to its social contexts. As such, it locates moral injury solely within the individual.

At the same time, Litz et al. make statements that indicate that there may be more to moral injury than damaged notions about the self. The authors state a number of times that moral injury can lead to a view of the world as malevolent. This suggests that soldiers may not only blame themselves for moral transgressions, but also others. However, the authors stop at mentioning that world-views may change, without reflecting on its possible significance and consequences.

Morality as a static belief system

Lastly, Litz et al. speak of values and norms as “fundamental assumptions”. They stress that morally injured soldiers maintain “an intact moral belief system” (701). They emphasize the importance of “holding onto the idea of a moral self or a moral code” through “the acceptance of an imperfect self” (703).

That is, their model does describe cognitive self-schemes, which include self-perceptions regarding goodness and perfection, as dynamic and flexible schemes. However, this does not appear to be the case for the “moral code” as such. The moral code, or moral belief system, is conceptualized as “intact” after morally injurious experiences. The experiences would only alter soldiers’ perceptions of the extent to which their acts and personality conform to their moral belief system, it would not alter their moral beliefs as such. In other words, values and norms would remain rather fixed fundamentals, about which soldiers would maintain to think in the same way.

Inconsistent morality: incoherence of values and norms

The model of Litz et al. reveals a rather individualizing and mechanistic understanding of morality, which potentially leads to a limited understanding of the role of morality in deployment-related suffering. Since morality forms the core of moral injury, this is a critical point, and a task lies in further developing conceptualizations of morality in the context of deployment-related suffering. The next part of this article makes a start in this undertaking, by using insights of several authors into moral conflict-colored suffering that are more in line with the earlier provided rudimentary sketch of morality. In doing so, it explores how the complex and multifaceted nature of morality may have particular implications for soldiers’ experiences of moral conflict.

Central in the following exploration are the works of physician Jonathan Shay (1994), veteran and philosopher Camillo Bica (1999), and psychiatrist Robert J. Lifton (2005). All three authors have written relevant works on the moral dimensions of deployment-related suffering. Both Shay and Bica are cited as coining the concept of moral injury (Dokoupil 2012; Kirsch 2014). Lifton was a key figure in the introduction of PTSD in 1980 and while he does not use the term moral injury – which was not yet coined at the time – he was partly responsible for the attention paid to moral dimensions in the first definition of PTSD.

It is surprising that the model of Litz et al. neither refers to, nor makes use of, the insights of Shay, Bica, and Lifton.¹ In the following part of this article, all three authors will be linked to one particular aspect of the moral dimension of military practice. Bica's insights will play an important role in understanding morality's contradictory character. The next section on social aspects of moral conflict will mostly draw on the insights of Shay. Lifton's insights will underpin the last section on how moral conflict may alter moral beliefs.

Moral dilemmas, conflicting sets of values

The conception of values and norms as a harmonious system, which appears to be employed in the model of Litz et al., seems to be a belief that many people unconsciously hold about their own values and norms. It may be partly due to this belief that a confrontation with clashing values may have great impact on a person: a value conflict can make someone painfully aware of the potential inadequacy of his or her moral code.

This section discusses three cases of clashing values, which elaborate on the inconsistent aspects of morality and give insight into their potential bewildering implications. As such, this section will show that moral conflict may be more complicated than straightforward feelings of guilt and unambiguous experiences of wrongdoing.

Clashing values are most obvious in moral dilemmas. These may be everyday, "innocent" dilemmas, such as the ones in which a person has to choose between a white lie and insulting honesty. However, there are also dilemmas that imply a forced choice between two opposing values that both have tragic consequences, which philosopher Sartre referred to as a situation that will by definition create "dirty hands" (see Walzer 1973). Such situations can be quite "everyday" for deployed soldiers.

An experience that is often reported by soldiers is that of having denied medical care to civilians in need, because providing such care would have collided with operational rules (Baarda and Verweij 2006; Bouchard et al. 2010). Often, operational rules prohibit the provision of medical aid to civilians because of limited medical supplies. Sometimes, providing medical aid is also prohibited because of strategic considerations. This was the case in the following event, recounted by a Dutch soldier to one of the authors.

In Afghanistan, the soldier and his unit were carrying out a so-called good will operation in a rural area, when the unit was confronted with a child who was burned up to his neck. However, it soon became clear that the tribe elder was responsible for this; the burning was explained as a form of punishment. In the context of this particular operation, it was especially important to gain the trust and respect of the tribe elder, since tribe elders generally play an important role in creating good relations with the local population. The military medic that was part of the unit was therefore ordered not to interfere and, conforming to these orders, the medic refrained from providing care. Soon after, the boy died as a result of his injuries. Even today, the medic struggles with this event.

Although such a situation is an obviously tragic moral dilemma, it is important to note that the significance that dilemmas acquire are strongly shaped by the beliefs and expectations of the involved soldier, which are linked to the values and norms that he or she has developed within specific contexts. These values and norms shape not only the decision taken, but also the meaning of the decision. Although all soldiers in the discussed event were affected by the event, the military medic was particularly disturbed. For him, the

event entailed a conflict between his military and medical oath. He chose, or was forced to choose, to abide by his military oath, which left him in doubt with regard to his medical oath, and maybe also his humanitarian ethos as a person.

Conflicts within a set of values

Whereas the preceding case concerned a conflict between two different sets of values (which in the former example concerned professional value sets), an experience of moral conflict can also entail a clash within a single set of values. Take for instance military standards. Even if soldiers would only abide by the beliefs and expectations they have incorporated as a member of the military, they can be confronted with profound dilemmas.

Such a dilemma is present in the experiences of ex-marine Sarra (see Sherman 2011). On 26 March 2003, an Iraqi woman approached the convoy of which Sarra was part. The marines shouted at her in Arabic to stop, but the woman did not respond and kept approaching. This event was especially alarming because the marines had heard stories of suicide bombers disguising as innocent civilians. Should they fire or not? Sarra describes the following thoughts going through his head:

So she's walking and walking and walking ... I'm like, OK, we've had reports of suicide bombers, she's wearing all black, she's carrying a bag under her arm. One of two things is going to happen ... Either she's going to stop or we'd better drop her or [else] she's going to blow up and kill a bunch of guys ... So she's walking. She's walking. She's walking. I perceived her as a threat. You know what, I've got a shot. Two shots. The first one I think I missed her. Second one, I saw her buck. And then the Marines from the other amtrak [assault vehicle] opened up on her. And I was the only guy in my platoon to fire. And she hit the ground and when she hit the ground, there was a white flag in her hand, a piece of white flag in her hand. And I was like, "Oh my God". (Sarra cited in Sherman 2011, 109)

According to an official investigation of the incident, Sarra indeed was the only man in his platoon to fire. However, the woman was killed not by Sarra's fire but by the fire of the other platoon. Also, the shooting was considered justified within the Rules of Engagement. Yet, it did not matter to Sarra. He was not able to work as a soldier any more. He quit his job at the end of 2003, and co-founded "Iraq Veterans against the War" the year after (Kiernan 2004). As he later explained, this event changed the course of the war for him (Chaudhry 2004).

Sarra felt remorseful for not having waited longer before opening fire, and he felt responsible for the woman's death (Aronson 2005; Sherman 2011). At the same time, he did recognize the reasons why he decided to fire. In his notebook, he listed seven reasons why he had done the right thing (Kiernan 2004). Sarra's tragedy thus not merely entails the fact that he tried to shoot an innocent woman because he failed to see her white flag, but also that he was involved in a moral dilemma. Sarra could not have waited until he was entirely certain about the woman's intentions; if she was a suicide bomber, the troops would have found out when it was already too late. The key conflict that emerged here was between two moral obligations of which we can assume that soldiers particularly feel they should abide by: respecting the lives of non-combatants and protecting one's "brothers in arms". In situations like these, a soldier cannot do both at the same time.

Crumbling warrior mythology

As the discussed examples indicate, the experience of particular values conflicts can also generate more fundamental conflicts concerning one's deeply held convictions and principles. Soldiers may start to question the moral standards in which they once deeply believed. Take, for instance, the following reflections of a US soldier:

"I'm 22 years old and I must have killed 30 people. The same thing that you were given badges for, over in Iraq, you would be considered a serial killer over here. That's a very weird thought to have running around in your head when it's dark, going to sleep, or late at night". US soldier in the documentary *Beer is Cheaper than Therapy* (De Vries 2011).

Or take the words of veteran Ostrom, who was cited in the introduction. Ostrom said he "was bred to be a killer" and "rejoiced" in being one. However, in trying to re-adapt to civilian life and to feel "human" again, he feels guilty.

Camillo "Mac" Bica, a Vietnam veteran who became doctor of philosophy, describes these kinds of conflicts as well. According to Bica, the etiology of moral injury lies in the inherent conflict between civilian and military values (Bica 1999). Drawing, *inter alia*, on the famous argument of Grossman (1995), Bica maintains that it all starts at military education. Here, soldiers are transformed from civilians, who are raised with an aversion to killing, into warriors, who are "desensitized" regarding the killing of others. In the "warrior mythology", war is necessary and just, and the warrior is noble and righteous.

However, Bica argues, this mythology is the complete opposite of the "existential reality of war". In war, he says, a soldier is hit by the realization that war is chaos, and sometimes completely pointless. War is a world in which personal survival and revenge prevail, facts that go against the values in which the soldier deeply believed. As a result, the soldier's mythology of warriors as righteous men crumbles down, and "serious doubts arise regarding the necessity and justness of the enterprise and the nobility and righteousness of the warriors' involvement in it" (Bica 1999, 87).

Bica argues that when soldiers have had their warrior myth crumbled by the "irreconcilable demands of the combat situation" (1999, 89), they experience profound disorientation after returning home. What the soldier quoted earlier describes about the difference between moral standards held in Iraq and the US seems similar to what Bica terms "moral identity confusion". By this, Bica refers to the feeling of being torn between a civilian world, with values about killing which they recognize as once being their own, and the martial world of war and killing, which the soldiers are now part of. In the worst case, Bica argues, this disconnection could lead to the feeling that one's life no longer has meaning, one's world has become disjointed, and relations with others have become incomprehensible.

The above examples show that morality is a multi-faceted phenomenon. An important implication of morality's complex nature is that soldiers may be confronted with value conflict on several levels. These may involve, among others, conflicts within a single set of values (e.g. respecting and protecting human life), conflicts between two professional sets of values (e.g. medical and military), and conflicts between societal sets of values ("military" and "civilian"). Importantly, these different conflicts cannot be neatly separated. Instead, an event often is significant at several moral levels at the same time. Also, a moral conflict surrounding a particular event can engender fundamental moral conflicts that go beyond that event, as also indicated in Bica's argument and Sarra's account. Sarra experienced severe guilt and, at the same time, he understood his actions

within the context of the inevitably conflicting moral obligations of that situation and of war itself; the event led him to co-found “Iraq Veterans against the War”.

The moral conflicts described above are of a more complicated kind than those that Litz et al. describe. It remains true that, in some cases, an event may be experienced as a straightforward transgression and, in some cases, this experience, as well as the resulting feelings of guilt and shame, can be understood as either distorted or accurate. But in many other cases, the conflict appears to entail not only a contradiction between an act and one’s “moral code”, but also contradictions between or within moral codes as such. Such conflicts complicate the above distinctions between an inner moral code and a transgression that violates this moral code, and between distorted or accurate guilt.

Social dimensions of moral conflict: embittered by an imperfect military and society

Moral conflict has so far been discussed as an individual and inwardly directed conflict. Yet, the preceding section showed that the values involved in moral conflict as well as potential transgressions of those values are not completely intra-individual matters. Instead, moral conflict was shown to be embedded in a social context.

This social dimension of moral conflict indicates that “moral injury” may also entail moral thoughts and emotions like blame, which are generated by an exterior cause and thus are outwardly directed. The following anecdote suggests this indeed to be the case:

College student Joey Glick ... was halfway into his presentation when Quentin, a soldier who came as part of a local PTSD support group, raised his hand. “I have a question for you, but I’m not sure if you can answer it for me”, he asked as he gestured at the PowerPoint slide on the screen. “I’m listening to you say all this stuff about PTSD, and TBI, and the ABCs. But, can you tell me why we are in Afghanistan?” (Scandlyn and Hautzinger 2014, 14)

Although student Joey had studied how chaplains respond to soldiers’ mental health problems, his research had not enabled him to answer the question. As he later wrote in his thesis: “none of my informants saw a reason to engage political or moral questions when counseling soldiers or their families” (Scandlyn and Hautzinger 2014, 15).

Scandlyn and Hautzinger remark that the question of soldier Quentin shows the “narrow focus of PTSD”, but also note that “moral injury” – in its current conceptualization – is limited as well, “for it encapsulates suffering and keeps the emphasis on the individual soldier and his or her actions and away from the political and military leaders who ordered them into combat and the civilians, willingly or not, who stand behind them” (2014, 15).

We saw that Bica does contextualize the moral dimensions of combat-related suffering, in understanding moral conflict as being profoundly disillusioned by previously held military values. *Achilles in Vietnam* by Jonathan Shay (1994), a psychiatrist and former VA clinician, sheds further light on possible social dimensions of moral conflict. Moreover, unlike Bica, Shay’s insights also show the complicated ways in which morally injured soldiers relate to civilian morality.

Disenchanted by the army’s morality

Shay argues that the army can be seen as a moral construction. The shared expectations and values of the army form a moral universe that are seen by soldiers as “legitimate,

‘natural’, and personally binding” (1994, 6). The morality of a soldier is thus intimately linked to and dependent on the morality of the military organization, which goes so far as that the army can make soldiers willing to jeopardize their own lives.

Because of the specific and strong moral relation between a soldier and the army, Shay explains, its violation by the latter can have catastrophic consequences. In one section, Shay quotes a sergeant discussing an experience of such a violation. One morning, after a night of fighting, the sergeant and his unit found out that the enemy they thought they had killed consisted of fishermen and children, an experience of horror for the sergeant. However, the sergeant’s superiors merely said “that’s the hazards of war. They were in the wrong place”. They said: “you guys party”, “Erase that”, “Move on”. And so, however terrible the sergeant found the realization that his unit had killed innocent people, the sergeant also told his men not to “worry about it” (1994, 71). This event had seriously affected the sergeant. What happened here was that the sergeant’s own experience and perception of the event were completely denied by his commanders. Further, the sergeant had complied with this denial by also telling his own men “don’t worry about it”. It was an experience that Shay calls “the betrayal of ‘what’s right’”, committed by individuals who symbolically and literally personify the military organization, and who thus form a central moral authority in the soldier’s world (1994, 71).

Shay discovers the consequences of moral betrayal to be devastating. In his clinical practice, he was confronted with soldiers who experienced the loss of being able to think of a meaningful future, who had an overall mistrustful or even hostile attitude towards people, and experienced feelings of helplessness and hopelessness and mistrust of ideals. In other words, Shay observed a persistent shrinking of soldiers’ “temporal horizon”, their “social horizon”, and their “moral horizon” (1994, 176).

To Shay’s understanding of “the betrayal of ‘what’s right’” we may add that moral betrayal can also be less explicit. Boudreau, the veteran who believes that “moral injury” better applies to his experiences than “PTSD”, explains in his biography: “I just wanted to ... follow orders. I was content with that. But then I went to Iraq, and all those ideals that saturated my leaders’ rhetoric, and saturated my mind, went rotten ... I knew my ideals had slipped away” (Boudreau 2008, 189). Besides the feeling of being betrayed by false impetus, Boudreau describes how he now realizes that he was trained to kill without reflecting on what killing entailed:

when a Marine shoots better than his peers, he’s admired and he’s handed medals and badges and promotions – all to encourage him to pull the trigger with another man in his sights and kill him. Like it or not that’s desensitization. But desensitization doesn’t eliminate morality from the consciousness. It merely postpones cogitation (ibid).

Disenchanted by society’s morality

Shay also discusses, although more briefly and less systematically, how the reactions of civilians connect to deployment-related suffering. Shay speaks of US society as covered with a “cloak of safety” – a cloak that soldiers struggling with moral conflicts have lost.

Arguably, the existence of such a “cloak of safety” could lead civilians to choose to avoid raw accounts of trauma, as it may lead to the questioning of their moral beliefs, and “leaves us terrified and disoriented” (1994, 37). Although Shay finds this attitude understandable,

since it stems from the moral construction of “normal human life” (1994, 194), he stresses how it can hinder healing.

Being blamed for the war can be particularly harmful. In the introduction to his book, Shay cites a soldier saying: “When I first came back it was like I was living under a toilet and every five minutes somebody had diarrhea on me” (1994, xix). In another work more specifically on veterans’ homecoming, Shay discusses how veterans blame civilians and politicians for refusing to take any responsibility for the war, and thus for indirectly putting all blame on the veterans (2002, 102–103).

The observations of Shay indicate that most people do want to have their armed forces to protect their interests, but are simultaneously uncomfortable with violence and death. To Shay’s arguments we may add the following. A “cloak of safety” does not merely shape society’s general attitude towards soldiers, but also affects them in a very direct way. In democratic societies, decision-making on military missions lies in the hands of politicians and, since politicians are elected, also in those of society’s citizens. Indirectly, society thus influences the conditions and operational rules under which soldiers have to operate. The direct involvement of politicians and civilians in military missions, and the simultaneous denial of this involvement by many of them, seems to be what a soldier like Quentin describes when asking civilians “why we are in Afghanistan”.

To turn back to Shay, his overarching argument appears to be that “war can destroy the social contract binding soldiers to each other, to their commanders, and to the society that raised them as an army” (1994, 17). Shay understands moral injury as not merely the result of committing moral violations, but also of the experience of moral betrayal by others. The military organization may tend to justify those events that are experienced as moral transgressions, and society may not want to hear about it at all. Both can be seen as a form of denial, leading soldiers to deeply distrust their world and even to turn against war itself, as ex-marine Sarra did. This conception indeed corresponds with a study of veterans’ accounts, which found loss of trust or a sense of betrayal to be the most frequent theme (Vargas et al. 2013).

Litz et al. argue that the self-blaming of suffering soldiers should in some cases be understood as accurate rather than distorted, and therefore they aim to work toward “the acceptance of an imperfect self”. Shay’s insights can be read as an addition concerning the blaming of others. The view of some soldiers that the world is not as benevolent and just as previously thought is described by Shay not as a distorted view, but a real one. What follows is that moral conflict may not only result in acquired insight into the “imperfect self”, but in some cases also into an “imperfect” military or society.

Changed views on morality: questioning previous moral beliefs

When soldiers have been agonizingly confronted with the moral “imperfection” of themselves and/or others, what may happen to their ethical views? That is, what may happen to the ways they think about the phenomenon of morality as such?

According to Litz et al., feelings of guilt and shame indicate that one’s moral beliefs and expectations are maintained, because the experience of a transgression as “dissonance is only possible if the service member has an intact moral belief system” (2009, 701). While moral emotions indeed indicate the presence of moral standards, the idea that soldiers’ ethical beliefs remain unaltered after morally confronting

events requires investigation. The work of psychiatrist Lifton provides interesting insights into this question.

Counterfeit universes

In line with Bica, Lifton (2005) describes how soldiers may be confronted with the bizarre and morally absurd reality of war, a reality which is in direct conflict with the romantic notions of heroism that prevail at home. Soldiers may witness, experience, or cause suffering to which they cannot possibly attribute a meaning or purpose. Such experiences lead the soldiers to ask themselves “what the fuck are we doing here?” on the battlefield or, after having returned home, “what the hell *was* going on?” (2005, 37).

We saw that moral conflicts tied to a specific event within a mission may generate moral confusion about the mission at large. Lifton’s work shows that this process can also work the other way around; Lifton argues that soldiers will develop serious inner conflicts when they cannot interpret specific war experiences of injustice as something that happened within a war that itself was just and necessary. Lifton was confronted with veterans who could not believe that the Vietnam war was “dirty but necessary” (2005, 39), and who thus lacked any means to justify and come to terms with specific experiences during that war. Although Bica shows that moral conflict can also be caused by experiences in wars that are seen as just, it may be more severe when justification cannot be found beyond direct events of injustice. The soldiers that Lifton spoke experienced the Vietnam war itself as absurd and pointless: some soldiers afterwards, others already during their deployment. They perceived the war to be like a movie, and themselves as “boys playing soldiers” (2005, 168). They lacked any means to tie the killing they witnessed and committed to an overarching purpose. As a result, they came to see the universe of war, including themselves, as “counterfeit”.

Later in his book, Lifton describes situations that are similar to what Shay subsumes under the name “moral betrayal”, which Lifton labels “false witness”. Lifton shows how “betrayal” or “false witnessing” may not only be done by military leaders, but also by others. After homecoming, soldiers went to chaplains and military psychiatrists, as part of their attempts to convert their numbing and isolating guilt into a guilt with which they could live. By trying to understand their killings as pointless and immoral, and as part of a meaningless war, they sought ways *out* of their self-perceptions of being an immoral person. However, the chaplains and psychiatrists would instead justify and rationalize their actions. The struggles of soldiers were framed as personal problems, in their heads, for which they had to find a “cure” (2005, 166). As a result, the soldiers came to experience the “counterfeit universe” not only to lie in the jungles of Vietnam, but also here, in the home to which they had returned.

Lifton’s observations both correspond with and question the idea of moral beliefs as a system that remains “intact”. Lifton’s work does correspond with Litz et al.’s argument that experiences of shame and guilt indicate that someone has not lapsed into absolute nihilism – it seems that shame and guilt can help someone to preserve one’s feeling of being “human”. Yet, Lifton’s work also shows that, in some cases, the issue is more complicated. His insights show that if soldiers feel that the moral significance of events is corrupted by themselves or others, they may come to view their world as not only morally

impaired in the sense that it is “imperfect”, but also morally impaired in that it is “counterfeit”.

Counterfeit experiences appear to entail that soldiers have started to question the aptness of their own morality and that of the world around them. In the chapter called “The Counterfeit Universe”, Lifton quotes former marine medic and Vietnam veteran Philip Kingry: “The war isn’t just an excuse. *It was everything*. I am a lie. What I have to say is a lie. But it is the most true lie you will ever hear about a war” (Kingry cited in Lifton 2005, 187, emphasis in original). What we read here seems to be the following: moral conflict can not only alter perceptions about the extent to which people actually “practice what they preach”; in some cases, it can also alter one’s beliefs about what is “preached”. That is, a soldier may start to believe not only that people fail to live up to the values and norms they preach, but also that those values and norms as such do not suit reality; that they are “counterfeit”.

Conclusion

Models of PTSD and moral injury show that some forms of trauma-related guilt can be understood as unfounded, while others might instead be understood as accurate. Yet, the analysis of the moral dimension of deployment-related suffering has demonstrated that moral conflict is a lot more complex than this.

It became clear that moral injury does not always entail the experience of straightforward transgression. In cases of clashing values, soldiers may grapple with the question whether the acts they witnessed or committed were good or bad. Such a struggle may also engender moral conflict with regard to the overall purpose and righteousness of the mission in which they were deployed, which, in turn, may hinder the process of coming to terms with particular deployment events.

These insights also indicate that moral conflict may have important social dimensions. An individual incorporates various moral codes, learned in different social environments. When soldiers experience an event that makes them painfully aware of conflicts between or even within different moral codes, this may not only result in the blaming of self, but also in the blaming of others. Such an altered world-view might be as accurate and reasonable as judging the self for moral transgressions.

Furthermore, moral conflict may not only entail confrontation with the imperfection of self or others, but also with the imperfection of values as such. That is, when soldiers have been painfully made aware of the fact that different values or value constellations can be incompatible, this may shake the moral beliefs and expectations they used to hold. Soldiers may start to wrestle with the question whether there is such a thing as good and bad, and such a thing as purpose. Some may come to view both their own moral conventions and those of the worlds around them to be “messed up”, in the double meaning of impaired and illusory.

Finally, in all cases – remorse, anger, and counterfeit experiences – it seems that to interpret soldiers’ moral battles too quickly as erroneous thinking is to fail to take seriously their battles as existential, real struggles. However well-intended, responding to thoughts like “I/they should have known better” with efforts of justification and rationalization may amplify rather than alleviate feelings of misrecognition and counterfeit experiences. Most probably, this not only applies to deployment-related moral struggles, but to experiences of moral conflict in general.

This article is meant as a general exploration, and the resulting considerations call for more in-depth research on moral conflict. It is yet unclear what different conflicts soldiers experience, what consequences such conflicts may have for soldiers' beliefs and behavior, and how experiences of moral conflict may be shaped by different factors, such as training, rank, political practices, public opinion, and so on. Indeed, our analysis indicates that although the risk of moral conflict is inherent to the soldier's job, it also depends to a considerable extent on how soldiers are sent to war and received back home. And so, our considerations also call for further research on how mental health professionals, political leaders, and society at large tend to deal and struggle with the moral significance of war and violence, and with the discomforting topics of guilt and blame.

Note

1. In a 2013 article on moral injury in military family members, Nash and Litz (2013) refer to Shay's insights on the impact of betrayal, which we will also discuss in this article. However, the authors do not adequately integrate into their model Shay's emphasis on the social dimensions of moral injury, nor do they explicitly point out what we believe is a crucial insight, namely, that blaming of others can be just as accurate as self-blaming.

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